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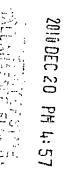
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J. SAULSBERRY EXAMINER

DEC 21 2010

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Mer Mar Kel LLC Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Merrin A. Bookskin Name of Person	
Merrill A. Poskskin Course by at Law P.A.	
20969 Cutosa Teu	
Doca Rafon FC 33433	
City/State and Zip Code Mbol/Stein D Bell South. Met E-mail aldress: (to be used for future annual report notification)	i and
For further information concerning this matter, please call:	Proces.
Meril A. Bookstein at (501) 301-9454 5	• .
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Street/Courier Address	

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
The name of the Ellinted Liability Company is.	
MerMarker Li	LC
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
20969 Certosa Terr	
Doca Raton Fr. 33433	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Merrill A. P.	DOOLSKIN E. 20
20969 Certosa	Terr ?
Doca Raton	ress (P.O. Box <u>NOT</u> acceptable) FL 33433
City, Sta	te, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position provided agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	Merrin A. Bookstein 20969 Certosa Terk Boca Raton F1. 33433
	2015 DEC 20
	PH #: 57
(Use attachment if necessary)	
ARTICLE V: Effective date, if other the (If an effective date is listed, the date in to or 90 days after the date of filing.)	an the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	Muthle -

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Printsk.

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)